

DATE: January 13, 2005
TO: County Emergency Management Directors
FROM: Jerry Haberl, State Training Supervisor
SUBJECT: **Course Recruitment: COMBINED COURSES: EXERCISE DESIGN - (G120) and
EXERCISE EVALUATION - (G130)**

The Wisconsin Division of Emergency Management will sponsor the Federal Emergency Management Agency **Exercise Design Course (G120)** and **Exercise Evaluation Course** on **APRIL 26-29, 2005**. This combined course will be conducted at **VOLK Field, Camp Douglas, WI**. The course will begin at 8:00 a.m. on Tuesday, April 26th, and conclude at approximately 12:00 p.m. on Friday, April 29, 2005. Successful students will be given credit for both courses.

These courses have been combined into a three and one-half day course, and will prepare emergency management professionals (first responders, public officials and medical personnel) to plan, conduct and evaluate disaster-training exercises based on their local emergency disaster plans. It is vitally important that all personnel who could be involved in a disaster are trained and familiar with the municipality's Emergency Operations Plan, and that the plan is tested on a regular basis.

We are requesting that you recruit attendees from the emergency management community who would be on your exercise design team (yourself, county board chair or executive, department heads, etc.). Additional candidates could come from law enforcement, fire service, public works, EMS, volunteer agencies, WTCS instructor staff, and hospitals. Since class size is limited to 30, registration will be on a first-come, first-served basis.

If people travel more than 50 miles one way and do not desire to commute, we will make reservations for participants at Volk Field, WI. Wisconsin Emergency Management will pay lodging costs (*for those traveling 50-miles or more*) and meals for all participants; however, the cost of travel, and any other incidentals associated with your stay will be a local responsibility. Additional administrative information will be provided in letters of confirmation to be sent when the course roster is finalized.

Please duplicate the enclosed registration form as necessary, and return the completed registration forms to your Regional Director no later than **MARCH 26, 2005**.

Thank you for helping us bring emergency management training to your community. If you have questions, or need further information, please contact your Regional Director, or Lisa Olson-McDonald at (608) 427-1794.

Encl: Registration Form
C: WEM Management
Regional Directors
Dan Wenborne
Lisa Olson-McDonald

REGISTRATION INFORMATION

EXERCISE DESIGN COURSE – (G120)
EXERCISE EVALUATION – (G130)
APRIL 26-29, 2005
VOLK FIELD

Please complete the information below and send it to your County Director by March 25, 2005. County Directors must submit this registration to their Region Office no later than March 26, 2005. Due to the demand for emergency management training, we recommend that you submit your applications as soon as possible. (Reproduce this sheet locally for additional people.)
PRINT CLEARLY

NAME _____ SIGNATURE _____

TITLE _____ AGENCY _____

SOCIAL SECURITY NUMBER _____

(MUST BE PROVIDED TO REGISTER)

HOME ADDRESS _____

CITY: _____ ZIP _____ COUNTY _____

WORK PHONE # _____ FAX #: _____ E-MAIL _____

<i>State Privacy Provision Authorization: Wisc Stats 166.03 and E.O. 9397. Disclosure: Disclosure of personal information is voluntary; however, nondisclosure may result in delay in processing your application. Secondary Purpose: In accordance with Wisconsin Privacy Provision 15.04(m) Wisc Stats, the personal information you provide may be used for purposes other than for which it was collected.</i>
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LODGING INFORMATION

_____ I live within 50 Miles, and do not need a room.

_____ I live over 50 miles away; please reserve a room on the following night(s):

(PLEASE CIRCLE THE NIGHTS THAT YOU NEED A ROOM)

MONDAY, APRIL 25, 2005

TUESDAY, APRIL 26, 2005

WEDNESDAY, APRIL 27, 2005

THURSDAY, APRIL 28, 2005

Do you require any special accommodations for a physical disability? (*please note that Volk Field does NOT have a publicly accessible elevator*)

SIGNATURE OF COUNTY EM DIRECTOR/DATE OF RECEIPT: _____

SIGNATURE OF REGIONAL DIRECTOR/DATE OF RECEIPT: _____